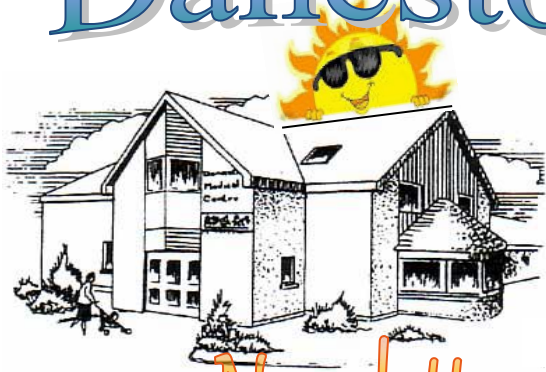


Danestone Matters



Summer Newsletter 2021

Updated statement from our GP Partners

With the gradual easing of restrictions as we move through this pandemic, we want to thank all our patients for their understanding and support during these very difficult times in the NHS. Our priority has been, and still is, to provide safe clinical care for all our patients, while at the same time, keeping our staff safe too.

With being a relatively small practice, in a very confined space which is challenging at the best of times, physical distancing has been particularly difficult. As such, we are not in a position to open our waiting room yet as we feel this would pose too big a risk of Covid19 transmission, in particular for the significant



number of the population who are not yet vaccinated and for those who are in the at risk groups. This does not mean that we are "closed", despite the outward appearance of the

locked door. Patients who need a face to face appointment will be invited to the surgery, with clinicians wearing the recommended PPE and following the guidance for cleaning, both of which take up precious time for each individual appointment.

Remote consulting, including phone and video appointments have proved very useful during the pandemic, as have econsults - a helpful way of obtaining information quickly, which then allows us to decide on the best plan going forwards. Looking ahead, many of the changes that have been forced upon us during the pandemic will be here to stay for the foreseeable future, particularly with the ongoing uncertainty around different variants of the virus. Some of these changes, such as prescriptions being sent directly to pharmacies, are for the better. Many changes however have made our work more difficult and stressful as we deal with the ongoing risk of infection, the increasing demand for appointments, the steep rise in mental



Working together, caring for your health

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illness, and the ever-changing Covid19 guidance.

Like all practices, our staff have sadly had to put up with a lot of unpleasant behaviour and verbal abuse from folk not seeming to understand that these changes have been forced upon us because of the pandemic. Our team at Danestone has worked tirelessly over the past 16 months to protect our patients during this pandemic. The NHS is not perfect, but at Danestone we are striving to look after our patients, our staff and ourselves, and there is no room for, and zero tolerance of verbal abuse. Dr Damian, Dr Rhona, Dr Kevin, Dr Linzi & Dr Julie

All our receptionists work to set guidelines laid down by our doctors. When you phone us for an appointment or with a query, we will always deal with you as per the doctors' instructions. Receptionists are not trained to make medical decisions, and we will not prevent you having an appointment with the doctor. We have a carefully laid down appointment system designed to meet the needs of the practice population as a whole.

There are times it is necessary for reception staff to ask you for an indication of your medical problem.

This is always at the request of the doctor and is to ensure that you receive the most appropriate medical care from the most appropriate health professional at the most appropriate time. We understand there may be times you may feel an issue is personal and do not wish to say what this is and we will respect that. You can also ask to speak in private away from reception if you are attending the practice in person. Every staff member is bound by the same strict confidentiality rules as the doctors and nurses.

Thank you for your support

First Contact Physiotherapy

The role of First Contact Physiotherapists in Primare Care is to assess patients with soft tissue, muscle and joint pain and to decide on the most appropriate management pathway. This can include:

- All soft tissue injuries, sprains, strains or sports injuries.
- Arthritis – any joint.
- Possible problems with muscles, ligaments, tendons or bone, eg tennis elbow, carpal tunnel syndrome, ankle sprains.
- Spinal pain including lower back pain, mid-back pain and neck pain.
- Spinal related pain in arms or legs, including nerve symptoms, eg pins and needles or numbness.
- Changes to walking.
- Post-orthopaedic surgery.

You don't have to be referred by your GP, you can contact Reception who will request a phone consultation initially with the Physiotherapist.

STAFF CHANGES

Temporary Goodbye!

One of our receptionists Natallie will be going on maternity leave in July. We wish her all the best with her new bundle of joy when s/he arrives.

Hello and Welcome!

Welcome to Sonya who will be joining the reception team covering Natallie's maternity leave. Pat Pahlmann is our new First Contact Physiotherapist who started with us in April. We also have a new Pharmacist Emma who has just started with us. Welcome to all.



You can get seriously ill with coronavirus at any age. Please get the COVID-19 vaccine when invited.



Alcohol - So, what are the guidelines?

- It is safest for both men and women not to drink more than 14 units a week on a regular basis.
- If you regularly drink as much as 14 units per week, it's best to spread your drinking evenly over three or more days. Saving up your units to have one or two heavy drinking episodes a week is binge drinking and increases your risk of long-term illness and injury.
- Having several drink-free days per week is a healthy strategy to reduce the amount of alcohol you drink. There are some useful apps that can help you stay in control of how much you are drinking and ensure you are staying within the guidelines e.g. Drink Free Days Tracker.

[Fact sheets | Alcohol Change UK](#)

Fact sheets. Our fact sheets set out the latest evidence to help you find out more about alcohol. Alcohol statistics. Read all the latest stats about alcohol in the UK:

<https://alcoholchange.org.uk/alcohol-facts/fact-sheets>

GOOD HYDRATION

Poor nutrition and hydration can sometimes make bladder and bowel symptoms worse. Between 60-70% of your body is made up of water and every part of your body needs water to function well. Becoming



dehydrated can lead to constipation and even bowel incontinence in some cases. Increasing your water intake can help you have more regular bowel movements and reduce symptoms associated with constipation. Dehydration also affects the bladder and can lead to the production of concentrated

urine. This can irritate the bladder and make you feel the urge to pass urine with urgency or more frequently or lead to incontinence. By drinking more fluids, this will help to flush any irritants through your bladder and out of your body. Drinking plenty will also help prevent recurrent urinary tract infections.

You should aim for around 6-8 mugs or glasses of fluid a day. Any liquids count (except alcohol) and some foods also contain fluid such as jelly, soup, yogurt, ice-lollies, and some fruits.

Whether or not you feel thirsty is not a good indicator of whether you are taking in enough fluid. Check the colour of your wee to be sure you are drinking enough. It should be light coloured. Dark yellow or brown wee is a sign that you are becoming dehydrated and you should increase your fluid intake.

Patient Participation Group

We are keen to have more patients involved in our Patient Participation Group. We are currently doing zoom meetings, but usually meet up quarterly to discuss practice issues from a patient perspective. If you are interested in being part of this discussion please contact reception.